

**LOBBYING SUPPLEMENTAL REGISTRATION FORM**

To be used for changes to registrations and terminations.

**Instructions**

- Print in ink or type.
- Complete form, have it notarized and return with \$10 fee to Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge LA 70809-7017, (504) 922-1400.
- This form must be submitted within 5 days of any changes in your registration form to add employers or those you represent or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

**FOR OFFICE USE ONLY**Postmark Date: 7/12/98

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ETHICS REGISTRATION  
CH. 1105, Art. 1001, Louisiana  
Constitution✓ #1901  
\$10.00

wm 1980492

1. NAME Edwards, Wanda J.  
Last First MI2. BUSINESS PHONE 504-923-11883. BUSINESS ADDRESS 4621 Jamestown Ave., Baton Rouge, La. 70808  
Street and No. City State Zip4. EMPLOYER Edwards & Edwards, Consultants5. EMPLOYER'S ADDRESS 4621 Jamestown Ave., Baton Rouge, La. 70808  
Street and No. City State Zip6. Have you ceased or terminated all lobbying activities requiring registration? Yes \_\_\_\_\_ No X

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name Wackenhut Corrections CorporationAddress 4200 Wackenhut Drive, Suite 100, Palm Beach Gardens, Florida 33410Business or purpose Private Prison Management☐ New Representation

Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

☒ Terminated Representation as of July 1, 1998

**SUPPLEMENTAL REGISTRATION FORM**



2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_

☐ New Representation  
Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

☐ Terminated Representation as of \_\_\_\_\_

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_

☐ New Representation  
Does this person pay you? \_\_\_\_\_

If No, who pays you? \_\_\_\_\_

☐ Terminated Representation as of \_\_\_\_\_

State of Louisiana

Parish of East Baton Rouge

Before me, the undersigned authority, personally came and appeared Wanda Edwards, who,  
after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Wanda Edwards  
Signature of Lobbyist

Sworn to and subscribed before me on this 1st day of July, 1998.

Harold W. Edmunds  
Notary Public